



MOORE AREA SHAG SOCIETY, INC.(MASS)
 ASSOCIATE MEMBERSHIP APPLICATION FORM

ANNUAL DUES: \$10.00 PER PERSON(January 1st-December 31st, 2017)

(Cash or Checks only.Checks are payable to MASS and mail to P.O. Box 992, Southern Pines, NC 28388)

PRINT the following information. One form per person.

FIRST NAME: _____ LAST NAME: _____ Birth Month: _____

ADDRESS: _____

CITY: _____ State: _____ ZIP: _____

E-MAIL: _____ Phone #: _____

Associate Member Signature (I am over 21 years old.)

By my signature above I agree to abide by the bylaws and the policies and procedures of the Moore Area Shag Society (MASS). I understand that my Associate Membership may be revoked by MASS at any time may it be deemed necessary. I agree that MASS, and its Board of Directors shall not be held responsible for any accidents, personal injury or loss of any personal property associated with my attendance at, or participation in any MASS function.

Associate Members must be 21yrs. old at time of application submission.Associate Members are allowed to attend club functions and pay an admission fee for each event attended. Associate Members have no voting privileges, but may participate in other club activities as deemed appropriate including serving on committees.They may not chair a committee or be elected to the Executive Board. An Associate Member may upgrade their membership to a full membership by: requesting to be upgraded, completing a "New Member Application Form" and paying the voting member annual dues.Funds are used for charitable contributions, DJ services, facilities rental, and other expenses such as publications, social events, and club activities. Officers,committee members, votingandnon-voting members are not compensated for their time or efforts.

The MASS e-mail listis reserved strictly for information about MASS related events and not shared. All emails are sent via blind copy. If you wish to unsubscribe to moorehaggers@gmail.com,please respond and state, "unsubscribe" in the subject line. Phone numbers are used for reminders and important information; you may opt out of the phone call list by following the instructions during the first call or by indicating "no calls" on this form. Text messaging is available; follow the instructions when receiving your first call.

For Membership Staff only

Date: ____/____,2016 Received: \$_____ Cash Check, Check # _____

Associate Member Number: _____to be assigned by the member responsible for membership record keeping

Through the National FastDance Association, our clubdance activities are licensed by:

